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ABSTRACT

Male and female subjects were shown one of two videotapes depicting a competent woman planning either to pursue her career or stay at home with her family, with or without also introducing her as a patient experiencing emotional difficulties in a 2 x 2 x 2 factorial design. Results indicated that female subjects perceived the stimulus person more favorably when opting for career rather than family, while male subjects showed the opposite pattern of preference. However, all subjects, regardless of sex, were more rejecting of her when labeled patient. Results are discussed in terms of sex role stereotypes and mental health stereotypes of women. (Author)

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THE SOCIAL PSYCHOLOGICAL DOUBLE BIND OF THE COMPETENT WOMAN

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Given the radically shifting roles of women and men in our society and the growing influence of liberation movements, it is not surprising that an increasing number of women are choosing careers as integral, and often focal parts of their adult lives. For many women, especially those floundering at the bottom rungs of the economic ladder, working is a given and rarely chosen way of life, and as such often yields little more than financial compensation. Yet for other more fortunate women, the choice of a career is accompanied by many social and personal rewards, constituting a major portion of their self-concept.

In addition to this relatively new image of the career-oriented female, women, like their male counterparts, have endured a socialization process, which for most women stresses the more traditional role of the family and home. Thus, whether working of necessity or pursuing a career by choice, all women face the common dilemma of how best to allocate their time and energy between competing roles. Career? Family? Both or none of the above? A dilemma, the impact of which not only touches each individual woman, but all those constituting her social milieu as well--in a word, everyone. It was in response to this pervasive problem that touches upon three distinct areas of psychological research that the present study was designed. The three areas being:

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1. Sex role stereotypes in general and people's perceptions of competent women in particular (e.g., Spence and Helmreich, 1972; Spence, Helmreich and Stapp, 1975; Stapp and Pines, 1976).

2. The negative consequences of the labeling process (e.g., Goffman, 1961; Kittrie, 1971; Langer and Abelson, 1974; Rosenhan, 1973; Temerlin, 1968; Szasz, 1963, 1965).

3. Mental health stereotypes for women (Bardwick, 1971; Broverman et al., 1970; Chesler, 1972; Gove and Tudor, 1973; Neulinger, 1968; Solomon, 1976).

Thus, the present study attempted to combine these three areas for the purpose of a scientific inquiry into the social psychological double bind confronting competent women in our society.

Given the previous research on sex role stereotypes, the first hypothesis predicted that male and female subjects would differentially perceive the stimulus person depending upon her choice of career or family, with females perceiving her more favorably in the career condition and males favoring her more in the family condition. The literature on mental health stereotypes for women enabled us to posit the second hypothesis, that regardless of sex, subjects would be far more rejecting of the stimulus person in the patient as opposed to the nonpatient condition. The third hypothesis, investigating the interaction between context (career or family) and condition (patient or nonpatient) and the effect of subject's sex on this interaction was exploratory in nature, thus allowing no specific predictions.

Method

A 2 x 2 x 2 factorial design was used in this experiment, with context (career-family), condition (patient-nonpatient), and sex of subjects (male-

female), as factors.

Procedure

Subjects were 192 students, 81 males and 110 females at the University of California, Berkeley. They were run in groups of 5 to 20 as part of what they were told was a study of impression formation. At the beginning of each session, subjects were informed that they would be viewing a videotaped portion of an interview that was conducted especially for this study. Based on this prerecorded interview, they would be asked to answer a series of questions about the person they had just seen.

Condition: Patient vs. Nonpatient

Eighty-three of the subjects in the "patient" condition were given additional information. They were told that what they would be seeing is a portion of a psychiatric intake interview in which the person's professional goals are explored. In order to give the subjects a "somewhat fuller understanding of the case," a short written patient profile was presented which constituted the first page of the questionnaire for subjects in the "patient" condition. The patient profile described the stimulus person as a 30-year-old married female with a 1-year-old child and a career as a historian of science. Although a battery of medical tests gave all indications of a normal healthy woman, the patient complained of changes in mood and affect, tension, anxiety, and lapses in concentration at work. It also depicted the patient as feeling alienated from her spouse and as suffering from periods of hopelessness and despair in which she constantly questioned the value of life and her own adequacy as a woman.

Context: Career vs. Family

Following the instructions all 192 subjects were shown a videotape of a young woman being interviewed about her background and plans for the future. She was presented as a brilliant, competent and extremely successful person (e.g., graduated from Radcliffe, Phi Beta Kappa, with a double major in mathematics and history, received her Ph.D. from another top university with the highest honors, being supported all through her education by the most prestigious and competitive awards). She mentioned her side interests as math and music, playing a number of instruments, and appearing with amateur orchestras. She described herself as married and the mother of a 1-year old boy. After being presented with this part of the interview, which was directed toward establishing the stimulus person as an unusually brilliant and competent woman, for half of the subjects the videotaped interview concluded with the woman talking about her career plans (career condition) and for the other half of the subjects it concluded with her goals as a homemaker (family condition). (In the career condition the stimulus person talked about such things as her teaching, writing of professional articles, planning to head a conference in her field, and publishing her dissertation. In the family condition she mentioned the fact that she had just refused a tempting career offer because she wanted to stay home with her child while he was young, adding that she enjoyed her home activities.)

Instrument

After seeing one of the two videotapes described above, all subjects were given a series of questions in which they were asked to describe the stimulus person. The questionnaires were administered individually and kept strictly confidential. All questions were on a 6-point scale. Dimensions included were: How much would you like to spend time with the person,

work with her at the same job, and see her socially. Subjects were also asked to give their ratings on a number of personal attributes such as appearance, poise, liking, femininity, sex appropriateness, similarity to self, as well as a list of 15 adjectives on a semantic differential (independent, sincere, success-oriented, intelligent, active, competent, open-minded, kind, well-adjusted, aggressive, sensitive, dominant, warm, determined and stands up well under pressure).

Debriefing

Following the completion of the questionnaire the true purpose of the study was explained and all subjects were fully debriefed. In the discussion that followed subjects were shown the second videotape for the condition they had not previously seen and were asked to speculate on how their reactions would have differed. The discussions were lively and many issues surrounding the subject's perceptions of a competent woman and her roles were explored.

Results

A 2 x 2 x 2 analysis of variance, some descriptive statistics, and a correlation matrix were the major modes of data analysis. The study's results will be presented in five parts: (1) general impressions, (2) condition effect, (3) context effect, (4) mental health stereotypes for women, and (5) sex role stereotypes.

1. General impressions. In general Ss viewed the stimulus person as an extremely competent woman. Most (99%) saw her as intelligent, as well as competent, independent and success-oriented (85% each), determined and ambitious (83%). She was also described as poised (74%) and sex appropriate (69%). This general impression served as a validation of the experimental manipulation.

2. Condition effect. In general when the stimulus person was discussing career goals she was perceived as more capable by all Ss but was liked less by males than when she was discussing her family goals. Thus, she was rated by both male and female Ss as more active, success-oriented, independent, ambitious, aggressive, dominant, and determined. (All p values for these conditions main effects came out less than p = .001.)

A considerable condition by sex interaction (2 x 2 Anova) indicated that females were more affected than males by the condition manipulation. Women wanted most to work with the stimulus person in the career condition, and least in the family condition; for men the difference was much smaller and in the opposite direction (p = .023). The stimulus person was also seen as most competent (p = .045), independent (p = .022), sincere (p = .050), intelligent (p = .008), determined (p = .008), and standing up well under pressure (p = .005) by women in the career condition, and least so in the family condition. In all these cases the difference for males was much smaller and mostly in the opposite direction.

Interestingly, males described the stimulus person as most open-minded (p = .001) and similar to themselves (p = .018) in the family condition and least so by females in the family condition. Males also perceived her as most warm (p = .005), sensitive (p = .010) and kind (p = .001) in the family condition, and least so in the career condition. For females the difference between the two conditions was much smaller and in the opposite direction.

3. Context effect. In general the more labeling of the stimulus person as a patient had a profound impact on Ss' perceptions. When described as a patient, the stimulus person was perceived as less active (p = .007), less competent (p = .017), less well-adjusted (p = .001), and less determined (p = .001). Ss wanted to spend less time with her (p = .019) and saw her as

less able to stand up under pressure (p = .001). All these main effects serve as validations of the context.

As for the context by sex interaction, males were generally more affected by context than females. Males liked the stimulus person more (p = .012), and found her most warm (p = .006). For females in both cases the context made very little difference. Males also liked most to work with the stimulus person when she was not described as a patient, and least when a patient. For females the difference was very small and in the opposite direction (p = .001).

4. Mental health sterotypes for women. In general the concept of femininity was highly related to perceptions of mental health. Being perceived as more normal was correlated with being seen as more feminine (r = .3129, p = .006), with a better prognosis (r = .5134, p = .000) and with seeing the stimulus person's problems as being caused by external rather than internal factors (r = -.2748, p = .017). As expected, being perceived as normal was also correlated with being perceived as well-adjusted (r = .4077, p = .000), and with being able to stand up well under pressure (r = -.3087, p = .006).

In a similar vein those who thought that the stimulus person had an excellent chance of recovery saw her as more feminine (r = -.3488, p = .033), better adjusted (r = -.2236, p = .052), more warm (r = -.2491, p = .030), and indicated they wanted to work with her more (r = -.2899, p = .010). Severe diagnosis was correlated with perceiving the stimulus person as less sex appropriate (r = -.2622, p = .023).

5. Sex role sterotypes. In general adjectival ratings which have been found to be related to traditional perceptions of women were corroborated in the present study. Those Ss who saw the stimulus person as feminine also

saw her as sex appropriate ($r = .3038$, $p = .000$), better adjusted ($r = .3396$, $p = .000$), less active ($r = .2477$, $p = .032$), less aggressive ($r = .2821$, $p = .014$), more sensitive ($r = .3941$, $p = .000$), more warm ($r = -.4044$, $p = .000$), more kind ($r = .2988$, $p = .000$), and more submissive ($r = .1816$, $p = .015$).

Ss also wanted to spend more time with her, work with her more, and preferred her more as a friend. It is interesting to note that female Ss also applied these traditional perceptions of women to themselves when asked to rate themselves on a number of self-concept dimensions. Ss described themselves as more intimate ($r = .4065$, $p = .000$), more friendly ($r = .2874$, $p = .010$), more warm ($r = .4398$, $p = .000$), more normal ($r = .2698$, $p = .016$) and less introverted ($r = .2381$, $p = .034$) than men.

Discussion

In the present study the effect of a woman's life goals (i.e., career vs. family) and her mental health status (i.e., patient vs. nonpatient) on subjects' perceptions were examined. As was expected by her outstanding qualifications, the stimulus person was viewed by the subjects, who saw her interview on a videotape, as a highly competent, brilliant, and successful woman. It would be interesting, of course, to replicate this study with a man as the stimulus person, holding the context material constant to investigate whether subjects' perceptions of a competent man would differ from those of the competent woman.

Condition Effect: Sex Role Stereotypes

The main condition effect showed a significant difference in the subjects' perceptions of the stimulus person, depending on the life goals she expressed. In the career condition descriptions of her consisted of

attributes which have been traditionally ascribed to career-oriented males. Thus, for instance, she was described as more aggressive, dominant and independent, etc., attributes generally associated with maleness in our society. In addition, she was perceived as success-oriented, ambitious, etc., attributes which are generally associated with the pursuit of a career.

One should remember that the subjects in both groups saw the identical videotape at the beginning of the experiment, representing that portion of the interview that established the stimulus person as truly outstanding. And yet, just because in one condition she talked about her child and family, never implying that she would completely abandon her career, it was enough to color the subjects' perceptions of her so significantly. The conflict between career and family and its resulting double bind is not unique to the woman interviewed in this study; it faces every career woman who wants also to have a family. Perhaps to avoid being caught in this double bind, increasing numbers of young women are opting not to have a family.

Even though part-time positions and job sharing are becoming more common and accepted, the results of our study seem to indicate that even for our liberal and supposedly enlightened and tolerant subject pool of Berkeley undergraduates, the mere choice of a woman to have a family almost automatically decreases her competence in the eyes of some others.

As for the condition by sex interaction women perceived the stimulus person, when introduced as a career woman, as most competent. In the family condition the direction was reversed with women ranking her the lowest. This interesting finding can be interpreted as a reflection of how society views a career woman who chooses to have a family. For the young women who served as subjects in the experiment the conflict is not an abstract intellectual exercise, but rather a real issue they must struggle with and

resolve for themselves either at present or in the future. Given the prevalence and social desirability of women's liberation movements, especially among college populations, and their emphasis on careers for women, it is quite understandable that the stimulus person would be perceived much more favorably when espousing career goals.

In contrast to the women, men in the study had more favorable impressions of the stimulus person in the family condition. It might be that career women are somewhat threatening for males, especially a woman as competent and successful as the stimulus person. On the other hand, a woman who chose family is more understandable, better fitting to the usual sex role stereotypes of women in our society, and possibly less threatening. Thus, she was seen by males in the family condition not only as most warm, sensitive, and kind (which are the usual stereotypes for women) but also as most open-minded and similar to themselves. This last rather surprising result may be interpreted to mean that men view the stimulus person in the family condition as more similar to themselves in terms of their values and their traditional attitudes toward women.

Whatever the explanation utilized to understand the results, one thing seems rather evident from the data. Even for students, most of whom have been well schooled in the negative effects of sex role stereotypes and who are considered open-minded and bright, the competent woman is still bound in a double bind in which she is doomed if she does, and is doomed if she does not. If she chooses career life, she will be seen, especially by males, as less feminine and less likeable. But if she chooses to have a family she will be seen as less competent.

Context Effect: Mental Health Stereotypes

When the subjects for the study were described as liberal, openminded, and bright, the description related to other assumed aspects of their attitude structure in addition to sex role stereotypes, namely their attitudes toward mental health. One of the concepts social psychology students are educated, knowledgeable and sensitive to is the myth of mental illness and negative stigma of the mental health stereotypes. Yet, when described as a patient the stimulus person was perceived as less well-adjusted, less capable, determined and active, and as less able to stand up under pressure--variables associated with the usual mental health stereotypes. Subjects also wanted to spend less time with the stimulus person, which given their interest in psychology, and the fact that some of them may puruse a career in the field is rather unsettling.

As for the context by sex interaction, men were much more affected by context than women, a finding indirectly predicted by some of the literature on women in mental health (e.g., Chesler, 1972). When not a patient, males liked the stimulus person and wanted to spend time with here, while they were far more rejecting of her in the patient condition. One way to explain this interesting finding is that perhaps a woman who is presented as a patient is not perceived by males as someone who can provide, and therefore not a "true woman" in the traditional sense. Additional support for this hypothesized explanation is derived from the mental health stereotypes also found in the present study. Perceiving the stimulus person as less normal was correlated with her being viewed as less feminine, and as less well-adjusted. Similarly, more severe diagnoses were correlated with her being seen as less sex appropriate. And it should be emphasized again that the videotapes students saw in both context conditions were identical

Therefore, the differences in the perception of the stimulus person can only be attributed to the labeling of her as a patient.

Once again the summary of this data brings us back to the double bind of the competent woman: If she is feminine, and traditionally sex appropriate, she is also seen as better adjusted, less aggressive, more sensitive, warm and kind. Only if such, namely, "normal" and better able to provide, do men want her company. But when less able to provide, either because of her mental state, or because of a commitment to a career, she is perceived as less feminine and less desirable. It is a sad fact of life that it is still the woman who has to carry the primary burden of the conflict and pay the ultimate price of her choice, since even in this day and age women continue to be caught in this powerful social psychological double bind.

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